

Diphenhydramine

This sheet is about exposure to diphenhydramine in pregnancy and while breastfeeding. This information should not take the place of medical care and advice from your healthcare providers.

What is diphenhydramine?

Diphenhydramine is an antihistamine. It is found in many medications, both prescription and over-the-counter. It is commonly used to treat allergy symptoms, and may also be used to treat nausea, motion sickness, insomnia, itchy skin, and tremor of Parkinson's disease. Some brand names for diphenhydramine include: Benadryl®, Unisom®, Sominex®, or Nytol®.

I take diphenhydramine. Can it make it harder for me to get pregnant?

It is not known if diphenhydramine can make it harder to become pregnant.

I just found out I am pregnant. Should I stop taking diphenhydramine?

You should talk with your healthcare provider before making any changes to how you take your medication. It is important to consider the benefits of treating your condition during pregnancy.

Does taking diphenhydramine increase the chance for miscarriage?

Miscarriage can occur in any pregnancy. The results from one study did not show an increased chance of miscarriage with the use of antihistamines, including diphenhydramine, in early pregnancy.

Does taking diphenhydramine increase the chance of birth defects?

Every pregnancy starts out with a 3-5% chance of having a birth defect. This is called the background risk. A few studies have suggested a higher chance for birth defects when diphenhydramine is used during the first trimester. However, these studies do not all agree and no consistent pattern of birth defects has been noted. In addition, several studies showed no increased chance of birth defects with the use of diphenhydramine in early pregnancy. Based on current research, it is unlikely that diphenhydramine would cause an increased chance for birth defects.

Could taking diphenhydramine cause other pregnancy complications?

Occasional use of diphenhydramine at recommended doses is not expected to cause problems in pregnancy. However, there are reports of problems with the use of diphenhydramine in the third trimester. These reports usually involve using more of the medication than is recommended or using it for longer than the recommended time.

It is not clear if the use of diphenhydramine is associated with an increased chance for preterm delivery. Some studies have reported an increased chance but the association was weak.

I need to take diphenhydramine throughout my entire pregnancy. Will it cause withdrawal symptoms in my baby after birth?

There are a few reports of withdrawal symptoms (tremors and diarrhea) in infants whose mothers took diphenhydramine daily throughout pregnancy.

Does taking diphenhydramine in pregnancy cause long-term problems in behavior or learning for the baby?

It is not known if diphenhydramine exposure in a pregnancy can cause behavior or learning issues.

Is there anyone who should avoid taking diphenhydramine during pregnancy?

A single human report in 1985 and animal data have suggested that the combination of the two medications temazepam (a benzodiazepine) and diphenhydramine might increase the chance for stillbirth or infant death shortly after birth. Due to the potential drug interaction, it has been recommended that these two medications not be used together during pregnancy.

Can I breastfeed while taking diphenhydramine?

Diphenhydramine has not been well studied for use in breastfeeding. This medication can cause sleepiness in adults as well as the nursing baby. Although the levels are low in breastmilk, two studies that examined the use of antihistamines such as diphenhydramine while breastfeeding, reported their babies were irritable, sleepier, and/or slept less. However, short-term or occasional use of diphenhydramine would be unlikely to pose an increased chance of harm during breastfeeding. If you need to take an antihistamine regularly, ask your healthcare provider if a non-sedating medication would work for your symptoms. Be sure to talk to your healthcare provider about all of your breastfeeding questions.

If a male takes diphenhydramine, could it affect fertility (ability to get partner pregnant) or increase the chance of birth defects?

There are no studies looking to see if diphenhydramine use by males would cause any problems for conceiving or problems during a partner's pregnancy. In general, exposures that fathers or sperm donors have are unlikely to increase the risks to a pregnancy. For more information, please see the MotherToBaby fact sheet Paternal Exposures at <https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/>.

Please click [here](#) for references.

Questions? Call 866.626.6847 | Text 855.999.3525 | Email or Chat at [MotherToBaby.org](https://mothertobaby.org).

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